

**CITY OF DAYTON**

111 S. 1<sup>st</sup> St.  
Dayton, WA 99328  
(T) 509.382.2361

**APPLICATION FOR UTILITY SERVICES**

TODAY'S DATE: \_\_\_\_\_

EFFECTIVE DATE OF SERVICE: \_\_\_\_\_

CUSTOMER NAME(S): \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

LOCAL PHONE NUMBER: \_\_\_\_\_

DRIVER'S LICENSE NO. \_\_\_\_\_

EMERGENCY CONTACT/PHONE NO.: \_\_\_\_\_

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**IF RENTING THIS PROPERTY, PLEASE PROVIDE THE FOLLOWING LANDLORD INFORMATION:**

LANDLORD NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE NO.: \_\_\_\_\_

By entering into this service agreement, I hereby grant the City of Dayton permission to enter and remain upon the property of the above service address for the purpose of installing, monitoring, repairing and/or terminating utility services described in this agreement. Such permission to enter and remain upon said property shall be effective for the duration of the service agreement.

The City of Dayton Customer Service Representative explained the City's billing and collection policies and I understand that failure to comply with this agreement could result in interruption of utility services.

CUSTOMER INITIALS: \_\_\_\_\_

I, the undersigned, request the City of Dayton to provide utility services at the above service address and promise to pay in accordance with the City of Dayton's ordinance at rates established by the Dayton City Council.

CUSTOMER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

CUSTOMER SERVICE REPRESENTATIVE \_\_\_\_\_

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**FOR OFFICIAL USE:**

WATER \_\_\_\_\_ SEWER \_\_\_\_\_ GARBAGE \_\_\_\_\_

INSIDE CITY LIMITS \_\_\_\_\_ OUTSIDE CITY LIMITS \_\_\_\_\_

CURRENT WATER STATUS: \_\_\_\_\_ OFF \_\_\_\_\_ ON

**IF WATER STATUS IS OFF, \$20.00 TURN-ON FEE PAID:**

\_\_\_\_\_ **YES**                      \_\_\_\_\_ **NO**

**NEED GARBAGE CAN DELIVERED:** \_\_\_\_\_ **YES**                      \_\_\_\_\_ **NO**

**OLD ACCOUNT NO.** \_\_\_\_\_ **NEW ACCOUNT NO.** \_\_\_\_\_

**METER READING/DATE OF READING:** \_\_\_\_\_

**The following information is required by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in anyway. However, if you chose not to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.**

**Ethnicity**

\_\_\_\_\_ **Hispanic or Latino**                      \_\_\_\_\_ **Not Hispanic or Latino**

**Race**

\_\_\_\_\_ **American Indian/Alaskan Native**  
\_\_\_\_\_ **Asian**  
\_\_\_\_\_ **Black or African American**  
\_\_\_\_\_ **Native Hawaiian or Pacific Islander**  
\_\_\_\_\_ **White**

**Sex**

\_\_\_\_\_ **Male**  
\_\_\_\_\_ **Female**